

Sep 20th, 3:00 PM - 4:45 PM

Federal HIV/AIDS Update

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The AIDS Institute

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Federal HIV/AIDS Update

Carl Schmid

Deputy Executive Director, The AIDS Institute

7th Annual Rural HIV Research and Training Conference

Savannah, GA

September 20, 2019



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Outline

- Ending the HIV Epidemic
- Domestic HIV Funding
- HIV, Hepatitis & STD National Strategies
- Other Issues
- Q & A

PRESIDENT TRUMP

2019 STATE OF THE UNION ADDRESS

Ending
the
HIV
Epidemic

We have an unprecedented
opportunity to end the HIV
epidemic in America.
Now is the time.



Ending
the
HIV
Epidemic

www.hiv.gov

Ending the HIV Epidemic Initiative

GOAL

75%
reduction
in new HIV
infections
in 5 years
and at least
90%
reduction
in 10 years.



HHS will work with each community to establish local teams on the ground to tailor and implement strategies to:



Diagnose all people with HIV as early as possible.

Treat people with HIV rapidly and effectively to reach sustained viral suppression.



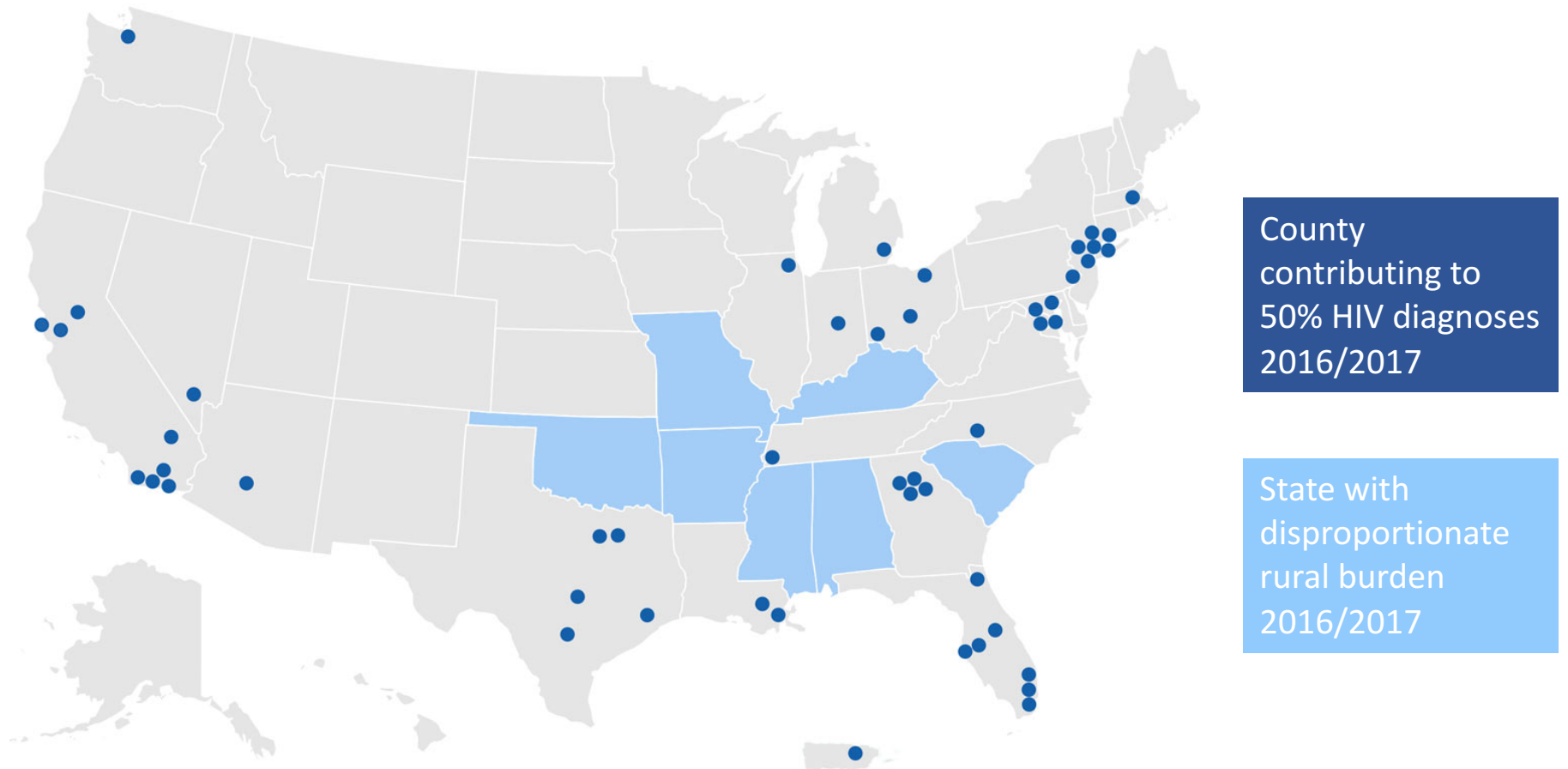
Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs).

Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.



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EtHE Target Locations



PRESIDENT'S 2020 BUDGET PROPOSAL

DISCRETIONARY INVESTMENTS (+\$291 MILLION)

| AGENCY | ACTIVITY | NEW \$\$ |
|-----------|--|----------------------|
| CDC | <ul style="list-style-type: none"> Test and link persons to treatment; state and local support; surveillance Augmentation of public health staff in local jurisdictions | \$140 M |
| HRSA | <ul style="list-style-type: none"> Ryan White care centers for treatment Community health centers for prevention, emphasizing PrEP | \$70 M \$50 M |
| IHS | <ul style="list-style-type: none"> Enhanced support for prevention, diagnosis, and links to treatment | \$25 M |
| NIH-CFARs | <ul style="list-style-type: none"> Inform HHS and partners on evidence-based practices and effectiveness | \$6 M |
| OASH | <ul style="list-style-type: none"> Project coordination, communication, management, and accountability; Leadership of the Minority AIDS Initiative | Maintains current \$ |
| SAMHSA | <ul style="list-style-type: none"> Minority AIDS Program and Substance Abuse Prevention and Treatment Block Grants for HIV/AIDS prevention for those with Substance Abuse or Mental Illness | Maintains current \$ |

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the
HIV

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EHE Stakeholder Events & Listening Sessions



Atlanta, GA



Miami, FL



Boston, MA



Little Rock, AR



Washington, DC



Baltimore, MD

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PACHA

11 members

Meetings

- March 2019 - Washington DC
- July 2019 - Jackson MS
- Oct. 2019 - Miami FL

Subcommittees

- Ending the Epidemic
- Stigma & Disparities
- Global



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FY19 Initiative Activities

FY 2019 ACTIVITIES

Minority HIV/AIDS Funding

| Activity | Amount |
|--|---------------------|
| Jurisdictional Plans | \$15,297,304 |
| CDC | \$12,372,304 |
| IHS | \$2,925,000 |
| Implementation Science | \$1,575,000 |
| NIH | |
| Data Analysis & Visualization System | \$1,600,000 |
| PACE Program | \$1,200,000 |
| Pilot Projects | \$6,500,000 |
| 3 Jurisdictions (Baltimore City; East Baton Rouge; DeKalb County) | |
| Cherokee Nation | |

Ending the HIV Epidemic: A Plan for America - *Implementation*

- Pilot Program Awards
 - July 1, 2019 – Minority HIV/AIDS Fund Awards made to jumpstart Initiative activities in affected jurisdictions:
 - ✓ CDC awarded \$1.5M to each jurisdiction for HIV Prevention, Diagnosis and Treatment
 - DeKalb County, GA
 - Baltimore City, MD
 - East Baton Rouge, LA
 - ✓ In addition, the Indian Health Service (IHS) awarded \$1.5 million in pilot funds to the Cherokee Nation in Oklahoma.
- Notice of Funding Opportunity (NOFO)
 - “Strategic Partnerships and Planning to Support Ending the HIV Epidemic in the United States” (CDC-RFA-PS19-1906)
 - ✓ Part A is funds one non-profit to enhance strategic communications, partnerships, policy analysis and interpretation
 - ✓ Part B makes funding available for up to 33 local and/or state health departments for local planning toward ending the HIV epidemic.
 - Release: 06/13/2019
 - Application Due Date: 07/12/2019
 - Target Award Date: 09/2019



HRSA HAB NOFOs

- Ryan White HIV/AIDS Program Parts A and B
 - Approximately \$55,125,000 available in year one
 - 47 applicants
- Technical Assistance Provider
 - \$3.75 million in year one
- Systems Coordination
 - \$1.25 million in year one
- Applications Due: October 15th



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Award Recipients and Funding Amounts

Appendix B: Funding Ranges (for Year One ONLY)

RWHAP Part A and Ohio:

| Tier 1 | Tier 2 | Tier 3 |
|---|---|---|
| Ceiling: \$ 9,000,000 Minimum: \$ 750,000 | Ceiling: \$ 4,000,000 Minimum: \$ 750,000 | Ceiling: \$ 2,000,000 Minimum: \$ 750,000 |
| Atlanta EMA, GA Baltimore EMA, MD Boston EMA, MA Chicago EMA, IL Dallas EMA, TX Fort Lauderdale EMA, FL Houston EMA, TX Los Angeles EMA, CA Miami EMA, FL New York EMA, NY Philadelphia EMA, PA Washington EMA, DC | Detroit EMA, MI New Orleans EMA, LA Newark EMA, NJ Orlando EMA, FL Phoenix EMA, AZ Riverside-San Bernardino TGA, CA San Diego EMA, CA San Francisco EMA, CA San Juan EMA, PR Tampa-St. Petersburg EMA, FL West Palm Beach EMA, FL | Austin TGA, TX Baton Rouge TGA, LA Charlotte-Gastonia TGA, NC Cleveland-Lorain-Elyria TGA, OH Columbus TGA, OH Fort Worth TGA, TX Indianapolis TGA, IN Jacksonville TGA, FL Jersey City TGA, NJ Las Vegas TGA, NV Memphis TGA, TN Oakland TGA, CA *Ohio (for Hamilton Co.) Orange County TGA, CA Sacramento TGA, CA San Antonio TGA, TX Seattle TGA, WA |

- Average award amount based on \$55.1m
 - \$1.17m for 47 awards
- Part B states are eligible for \$750,000 – \$2,000,000

RWHAP Part B:

| State |
|----------------|
| Alabama |
| Arkansas |
| Kentucky |
| Mississippi |
| Missouri |
| Oklahoma |
| South Carolina |



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Future Funding

- Expected to increase from \$55m to an amount that achieves the EtHE 5-year goal:
 - 75% reduction in new HIV infections; sufficient resources addressing social determinants of health to those newly diagnosed, not virally suppressed, or those not yet in HIV care
- Funding availability in subsequent years dependent on satisfactory performance & in best interest of federal government
- Potential performance-based bonus



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Next Steps

- CDC Funding Opportunity Announcement
- HRSA Community Health Center
 - Focus on PrEP
- HRSA AETC Workforce Capacity
- Gilead PrEP Donation
 - For up to 200,000 uninsured individuals
 - 2.4 bottles per year
 - Through December 2030
 - Delivery Mechanism to be Announced later this year



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Ending the HIV Epidemic: Focus for Health Centers

182 HRSA-funded health centers have service delivery sites in the 57 identified geographic locations identified by the initiative

- **149** are funded by both RWHAP and Health Center Program (co-funded)
- **33** are not co-funded but are near RWHAP-funded organizations



Ending the HIV Epidemic: Health Centers

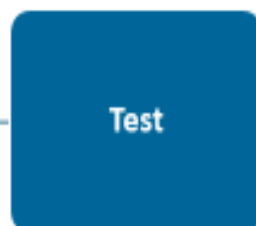
Respond rapidly to detect and respond to growing HIV clusters and prevent HIV infection (CDC)

Referrals of new patients at high risk (CDC, S/LHDs)



Health center outreach and in reach to identify patients at high risk

Diagnose all people as early as possible after infection



Link to Prevention and Care



Treat the infection rapidly and effectively to achieve viral suppression



Engage and Treat

Retain in Care

Suppress Viral Load



PrEP

Prevent people at risk using potent and proven prevention interventions, including medication that can prevent HIV



FQHC Objectives

Objectives*

Engage new and existing patients to identify those at risk for HIV

Increase patients tested for HIV

Increase patients who receive prevention education and clinically-indicated PrEP

Increase linkage to HIV treatment

Enhance/Establish partnerships to support PCHP activities

Within 8 months of award add at least 0.5 full-time equivalent personnel to support access to and use of PrEP



*Pending

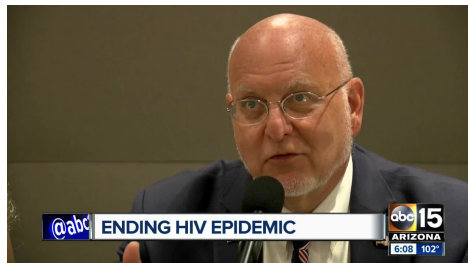


FY2020 – A Unique Opportunity



President Donald Trump's administration has had an at times fraught relationship with the HIV/AIDS community. | AP Photo

STATE OF THE UNION 2019
Trump's State of the Union pledge: Ending HIV transmissions by 2030



With federal help, Alameda County and SF hope to cut rate of HIV infections

Erin Alliday | July 20, 2018 | Updated July 20, 2018 4:4 p.m.



Congresswoman Barbara Lee delivers a speech during the Women's March at Civic Center Plaza in San Francisco, Calif., on Saturday, January 19, 2019. The event brought thousands of people to the city for a march aimed at push back against United States President Donald J. Trump and his policies and to remind people of the political power of women.



Bipartisan Support

“The HIV epidemic still plagues our Nation, with more than 38,000 Americans infected every year. In response, my Budget provides \$291 million to the Department of Health and Human Services to defeat the HIV/AIDS epidemic.”

-President Trump's FY2020 Budget



“We do support the administration's plan to reduce HIV transmission 90 percent in 10 years. So, we include the administration's request for \$120 million for programs through Health Resources and Services Administration to increase access to the ground-breaking HIV drugs and \$140 million for CDC's work in HIV outreach and disease monitoring. But, we go even further.”

-Rep. Rosa DeLauro, Chairwoman
House L-HHS Appropriations Subcommittee

The Ryan White HIV/AIDS Program

| | FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Subcmte. |
|--------------|-------------------------|----------------------------------|--------------------------|------------------------------|
| Part A | \$655.9 m (+\$0.0 m) | \$655.9 m (+\$0.0 m) | \$677.5 m (+21.6 m) | \$655.9 m (+\$0.0 m) |
| Part B: Care | \$414.7 m (+\$0.0 m) | \$414.7 m (+\$0.0 m) | \$419.6 m (+\$4.9 m) | \$414.7 m (+\$0.0 m) |
| Part B: ADAP | \$900.3 m (+\$0.0 m) | \$900.3 m (+\$0.0 m) | \$912.0 m (+\$11.7 m) | \$900.3 m (+\$0.0 m) |
| Part C | \$201.1 m (+\$0.0 m) | \$201.1 m (+\$0.0 m) | \$207.6 m (+\$6.5 m) | \$201.1 m (+\$0.0 m) |
| Part D | \$75.1 m (+\$0.0 m) | \$75.1 m (+\$0.0 m) | \$76.0 m (+\$0.9 m) | \$75.1 m (+\$0.0 m) |

The Ryan White HIV/AIDS Program

| | FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Subcmte |
|-----------------------------|------------------------|----------------------------------|------------------------|-----------------------------|
| Part F: AETCs | \$33.6 m (+\$0.0 m) | \$33.6 m (+\$0.0 m) | \$34.0 m (+\$0.4 m) | \$33.6 m (+\$0.0 m) |
| Part F: Dental | \$13.1 m (+\$0.0 m) | \$13.1 m (+\$0.0 m) | \$13.3 m (+\$0.2 m) | \$13.1 m (+\$0.0 m) |
| Part F: SPNS | \$25.0 m (+\$0.0 m) | \$25.0 m (+\$0.0 m) | \$25.0 m (+\$0.0 m) | \$25.0 m (+\$0.0 m) |
| Ending the Epidemic Plan | N/A | +\$70.0 m | +\$70.0 m | +\$70.0 m |

Centers for Disease Control

| | FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Subcommittee |
|---|-------------------------|----------------------------------|---------------------------|----------------------------------|
| Division of HIV/AIDS Prevention | \$788.7 m (+\$0.0 m) | \$928.7 m (+\$140.0 m) | \$945.6 m (+\$156.9 m) | \$928.7 m (+\$140.0 m) |
| Viral Hepatitis | \$39.0 m (+\$0.0 m) | \$39.0 m (+\$0.0 m) | \$50.0 m (+\$11.0 m) | \$39.0 m (+\$0.0 m) |
| STD Prevention | \$157.3 m (+\$0.0 m) | \$157.3 m (+\$0.0 m) | \$167.3 m (+\$10.0 m) | \$157.3 m (+\$0.0 m) |
| Opioid Related Infectious Diseases | \$5.0 m | \$58.0 m (+\$53.0 m) | \$35.0 m (+\$30.0 m) | \$10.0 m (+\$5.0 m) |

National Institutes of Health

| | FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Subcommittee |
|---------------|--------------------------|----------------------------------|---------------------------|----------------------------------|
| Total | \$39.1 b (+\$2.0 b) | \$33.0 b (-\$6.1 b) | \$41.1 b (+\$2.0 b) | \$42.1 b (+\$3.0 b) |
| AIDS Research | \$3.045 b (+\$45.0 m) | \$2.621 b (-\$423.9 m) | \$3.200 b (+\$155.0 m) | TBD |

Minority AIDS Initiative Programs

| | FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Subcommittee |
|---------------------------|-------------------------|----------------------------------|-------------------------|----------------------------------|
| Minority HIV/AIDS Fund | \$53.9 m (+\$0.0 m) | \$53.9 m (+\$0.0 m) | \$65.0 m (+\$11.1 m) | \$53.9 m (+\$0.0 m) |
| SAMHSA | \$116.0 m (+\$0.0 m) | \$116.0 m (+\$0.0 m) | \$121.0 m (+\$5.0 m) | \$116.0 m (+\$0.0 m) |



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Housing Opportunities for Persons with AIDS

| | FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Committee |
|-------|--------------------------|----------------------------------|--------------------------|-------------------------------|
| HOPWA | \$393.0 m (+\$18.0 m) | \$330.0 m (-\$63.0 m) | \$410.0 m (+\$17.0 m) | \$330.0 m (-\$63.0 m) |



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Sex-Ed & Family Planning Programs

| | FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Subcommittee |
|---|-------------------------|----------------------------------|---------------------------|-------------------------------|
| Title X | \$286.5 m (+\$0.0 m) | \$286.5 m (+\$0.0 m) | \$400.0 m (+\$113.5 m) | \$286.5 m (+\$0.0 m) |
| Teen Pregnancy Prevention Program | \$101.0 m (+\$0.0 m) | \$0.00 (-\$101.0 m) | \$110.0 m (+\$9.0 m) | \$101.0 m (+\$0.0 m) |
| "Sexual Risk Avoidance" Abstinence- Only Program | \$35.0 m (+\$10.0 m) | \$0.0 m (-\$35.0 m) | \$0.0 m (-\$35.0 m) | \$45.0 m (+\$10.0 m) |



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Total Domestic HIV Programs

| FY2019 Final | FY2020 President's Request | FY2020 House | FY2020 Senate Subcommittee |
|-----------------|----------------------------------|-------------------------|----------------------------------|
| \$6,716 b | \$6.903 b (-\$187 m) | \$7.235 b (+\$519 m) | \$6.938 b* (+222 m) |

* The Senate L-HHS Subcommittee did not include a specific funding level for NIH HIV/AIDS Research nor has the Senate released its bill to fund the Indian Health Service. This figure assumes AIDS Research is flat funded and \$25 m for EtE Initiative at the Indian Health Service.



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Where are we now?



- Senate
 - Labor HHS Allocation smaller than House
 - Mark up Postponed
 - Bill Released
- Continuing Resolution
 - Administration Proposed Anomaly
 - Congress did not include
 - Through November 21st
- Conference & President's Signature
- OMB Preparing FY21 Budget



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NATIONAL HIV STRATEGY & NATIONAL VIRAL HEPATITIS STRATEGY

- Target date for release: June, 2020 (current iterations expire 2020)
- Two separate strategies being developed in tandem
- National HIV Strategy
 - WIG: Reduce new HIV infections by 90% by 2030
 - WIG, Leading and Lag Indicators for Ending the HIV Epidemic initiative to be adopted
 - Additional indicators will be considered by the indicator subcommittee, as NHAS is broader than the initiative
- National Viral Hepatitis Strategy
 - Proposed WIG: Reduce new viral hepatitis infections by 80% by 2030
 - Indicator subcommittee discussing alignment with WHO indicators for viral hepatitis elimination; will develop Leading and Lag indicators



HIV and VH – Joint Federal Steering Committee Participants

Federal Departments:

- Department of Defense
- Department of Justice
- Equal Employment Opportunity Commission
- Department of Health and Human Services
- Department of Housing and Urban Affairs
- Veterans Administration

HHS agencies/offices:

- ACL
- AHRQ
- CDC
- CMS
- FDA
- HRSA
- IHS
- NIH
- OASH
 - OIDP
- OCR
- ONC
- OSG
- SAMHSA



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STI Federal Action Plan: Progress and Timeline

- Target date for release: 2020
- Federal Steering Committee meeting monthly since April 2019
 - Developing vision, goals, indicator measures, and strategies
- Subcommittees – subcommittees will develop/recommend strategies for each goal
 - 1) Primary Prevention; 2) Secondary and Tertiary Prevention/Care; 3) Indicators; 4) Disparities & Coordination; and 5) Education & Communication
- Public comments received
- hhs.gov/STI website for the STI Plan – launched June 19



Other Issues

- Affordable Care Act
 - Legal challenges, Waivers, Short Term Health Plans
- Medicaid
 - Waivers, Work Requirements
- Civil Rights
 - LGBT Rights, “1557” Proposed Rule, Immigration
- Drug Pricing





Thank you!

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